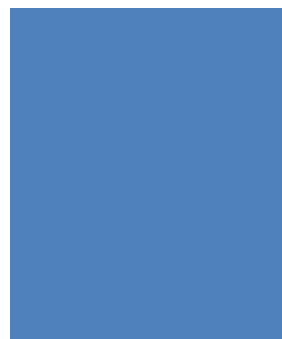


Wheelchair Summit: 25th February

Outputs from the day



Wheelchair Summit - key Aims:

Aims of the Summit:

1. To develop a shared understanding of the problems with the current commissioning of wheelchairs
2. To agree what a high quality service from a user perspective would be
3. To agree what needs to happen locally and nationally to improve the commissioning of wheelchairs
4. To develop a group of commissioner and service user champions who can influence a wider range of commissioners and facilitate improving services.

Two key questions were posed at the Summit:

1. What would a good wheelchair service look like for you?
2. What are the things we need to do to create a good wheelchair service?

Group Discussion highlights

- Delegates on the day included service users; CCG clinicians and senior managers; providers; colleagues from the Third Sector; Social Care and Education and the Department of Health and NHS England.
- Delegates were allocated to one of nine discussion tables to consider the two key questions
- The table discussions provided a wide range of feedback on what would a good quality wheelchair service looks like and what needed to change to make this happen?
- Some examples of key comments follow.....

Comments on current services

The process needs clarity and consistency across the country

Block contracts stifle creativity in provision

Better and more cost effective decisions could be made if based on current and future needs

Is the NHS making the most of its purchasing power with manufacturers?

Services aren't streamlined and duplication of assessments

Need systematic, honest assessment of individual needs

Wheelchair services eligibility – criteria doesn't promote independence and creates artificial choices

Wheelchairs offered should meet people's needs – people should not have to buy their own

Services should prioritise pain, press areas and independency

Service user requirements

Understand the person's needs and lifestyle and be realistic

Involve the service users in wheelchair design and delivery

Support independence by asking how the service user wants to live and what their goals are

Transitions from child to adult services: standardisation should enable lifestyle to be maintained

Reduce waiting times by improving the supply chain – provision and repairs

Repair teams should be mobile and able to visit service user to repair chairs

Service users to be able to give feedback and be involved in evaluation. PROMS?

After care – follow up – renewal of equipment once provided

Can we try before we buy?

Some suggestions for improving services

Proactive maintenance rather than waiting for the chair to go wrong. Review requirement to be checked via text

Consider the longer-term needs and develop chairs that can be adapted as things change

Wheelchair provision should be considered in every JSNA, HWB strategy and CCG plan

There needs to be integrated health and social care needs assessment

Improve training so MDTs can offer advice and recommendations about equipment

Create 'wheelchair passports': how to use, transport and even basic adjustments

Explore how personal health budgets can be used for wheelchairs & mechanisms to support self-funded upgrades

Replace silo funding with whole of life funding across health, social care and education

Work with manufacturers to reduce cost, improve adaptability of chairs

Action plan

The feedback from these discussions have been used to develop an action plan centred around the 6 key themes which emerged:

- Assessments
- Informed and empowered service users
- Commissioning and procurement
- Integration of health and social care
- Training for staff
- Innovation